

Atty. Docket No.: 4231/2055G

PATENT 1

### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of:

Choong-Chin Liew

Serial No.:

Entitled:

10/812,737

Filed:

A Method for the Detection of

Obesity Related Gene Ttranscripts in

Blood

Examiner:

Not Yet Assigned

Group Art Unit:

1634

Conf.:

4510 .

### CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8a

I hereby certify that this correspondence (and any paper or fee referred to as being enclosed) is being deposited with the United States Post Office as First Class Mail on the date indicated above in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

. Kathleen M. Williams Name of Person Mailing Paper

Signature of Person Mailing Paper

**Commissioner for Patents** P.O. Box 1450 Alexandria, VA 22313-1450

### TRANSMITTAL LETTER

Enclosed for filing in the above-referenced patent application are the following:

- 1. Request for Corrected Filing Receipt;
- A copy of the Official Filing Receipt with corrections indicated in red; 2.
- A copy of the Application Data Sheet as filed with the patent application on 3. March 30, 2004; and
- Return Postcard. 4.

The Commissioner for Patents is hereby authorized to charge any fees or to redit any overpayment to Deposit Account NO. 16-0085, Reference No. 4231/2055G. A duplicate of this transmittal letrer is enclosed for that purpose.

Respectfully submitted,

ganuary 12,2005

Name: Kathleen M./Williams

Registration No.: 34,380

Customer No.: 29933 Palmer & Dodge LLP 111 Huntington Avenue Boston, MA 02199-7613

Tel: 617-239-0100



Atty. Docket No.: 4231/2055G

**PATENT** 

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Application of:

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Kathleen M. Williams Name of Person Mailing Paper

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**Commissioner for Patents** P.O. Box 1450 **Alexandria, VA 22313-1450** 

### REQUEST FOR CORRECTED FILING RECEIPT

Sir:

Applicant requests issuance of a corrected Official Filing Receipt for the above-identified patent application. The filing receipt has noted an incorrect title as "Method for the Detection of Obesity Related Gene Transcripts in Blood" and should be corrected to read:

# -- A Method for the Detection of Obesity Related Gene Transcripts in Blood --

as indicated as indicated on the Application Data Sheet filed with the Application on March 30, 2004 (copy enclosed). Please correct the Filing Receipt in your proper manner.

A copy of the official Filing Receipt is enclosed with the correction highlighted in red. It is believed that no further fees are due for this application.

Respectfully submitted,

Date: <u>January</u> 12, 2005

Name: Kathleen M/Williams

Registration No.: 34,380

Customer No.: 29933 Palmer & Dodge LLP 111 Huntington Avenue Boston, MA 02199-7613

Tel: 617-239-0100



## United States Patent and Trademark Office



UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virginia 22313-1450 www.uspto.gov

APPL NO. | FILING OR 371 | ART UNIT | FIL FEE REC'D | ATTY DOCKET NO | DRAWINGS | TOT CLMS | IND CLMS | 10/812,737 | 03/30/2004 | 1634 | 1041 | 4231/2055G | 34 | 48 | 5

29933
PALMER & DODGE, LLP
KATHLEEN M. WILLIAMS
111 HUNTINGTON AVENUE
BOSTON, MA 02199

CONFIRMATION NO. 4510
UPDATED FILING RECEIPT
\*OC000000013572458\*

Date Mailed: 08/18/2004

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Choong-Chin Liew, Toronto, CANADA;

### **Assignment For Published Patent Application**

ChondroGene Limited:

### Domestic Priority data as claimed by applicant

This application is a DIV of 10/802,875 03/12/2004 which is a CIP of 10/601,518 06/20/2003 ... which is a CIP of 10/085,783 02/28/2002 which claims benefit of 60/271,955 02/28/2001 and claims benefit of 60/275,017 03/12/2001 and claims benefit of 60/305,340 07/13/2001 This application 10/812,737 is a CIP of 10/268,730 10/09/2002 which is a CON of 09/477,148 01/04/2000 ABN which claims benefit of 60/115,125 01/06/1999

Foreign Applications

If Required, Foreign Filing License Granted: 05/07/2004

Projected Publication Date: 11/25/2004

Non-Publication Request: No



Early Publication Request: No

\*\* SMALL ENTITY \*\*

Title

A

Method for the detection of obesity related gene transcripts in blood

**Preliminary Class** 

435

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### **NOT GRANTED**

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Express Mail Label No: EV242756493US

Date of Deposit: March 30, 2004

## **Application Data Sheet**

**Application Information** 

**Application Type::** 

Regular

Subject Matter::

Divisional

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R::

CD-R

Sequence submission:

Computer Readable Form (CRF)::

Yes

Number of copies of CRF::

2

Title::

A Method for the Detection of Obesity Related Gene

Transcripts in Blood

Attorney Docket Number::

4231/2055G

Request for Early Publication?::

No

Request for Non-Publication?::

Yes

Suggested Drawing Figure::

**Total Drawing Sheets:**:

34

Small Entity::

Yes

Petition Included::

Yes

Secrecy Order in Patent

No

Application?::

**Applicant Information** 

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Canada

1

Status::

Full Capacity



Given Name::

Choong-Chin

Middle Name::

Family Name::

Liew

City of Residence::

**Toronto** 

State or Province of Residence::

Ontario

Country of Residence::

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Street of Mailing Address::

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City of Mailing Address::

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State or Province of Mailing Address::

Ontario

Postal or Zip Code of Mailing Address::

M2R 3S1

### **Correspondence Information**

Correspondence Customer Number::

29933

## **Representative Information**

Representative Information Number::	29933

# **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	is a Divisional of	(10/802,875) Atty. Docket No. 4231/2055B	3/12/2004
which is a	Continuation in Part of	10/601,518	6/20/2003
which is a	Continuation in Part of	10/085,783	2/28/2002
which claims benefit to	Provisional Application	60/271,955	2/28/2001



and	Provisional Application	60/275,017	3/12/2001
and	Provisional Application	60/305,340	7/13/2001
and claims benefit as a Continuation In Part to	Application	10/268,730	10/9/2002
which is a	Continuation of Application	09/477,148	1/4/2000
which claims benefit of	Provisional Application	60/115,125	1/6/1999

# Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

3

# **Assignee Information**

Assignee Name:: ChondroGene Limited

Initial 1/4/05